

PART B - FEE(S) TRANSMITTAL

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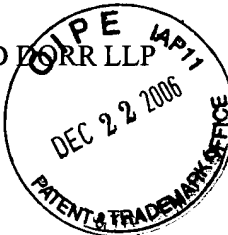
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10/04/2006

WILMER CUTLER PICKERING HALE AND DORR LLP
 60 STATE STREET
 BOSTON, MA 02109

12/26/2006 GWORDDF2 00000053 080219 10047060

01 FC:1501 1400.00 DA
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Janice M. Rousset	(Depositor's name)
<i>Janice M. Rousset</i>	(Signature)
December 20, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/047,060	01/14/2002	Anand Baichwal	540.1004CON2	3558

TITLE OF INVENTION: CONTROLLED RELEASE INSUFFLATION CARRIER FOR MEDICAMENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	01/04/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
AZPURU, CARLOS A	1615	424-434000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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Wilmer Cutler Pickering
 1 Hale & Dorr LLP
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Penwest Pharmaceuticals Company

Danbury, CT

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies _____

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- ☐ A check is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 08-0219 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Emily R. Whelan

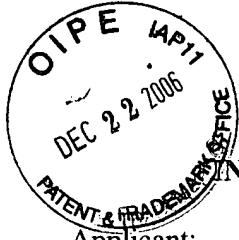
Date December 20, 2006

Typed or printed name Emily R. Whelan

Registration No. 50,391

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Docket No.: 0107223.00187US5
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Anand R. Baichwal et al. Confirmation No.: 3558
Application No.: 10/047,060 Art Unit: 1615
Filed: January 14, 2002 Examiner: C. A. Azpuru
Title: CONTROLLED RELEASE INSUFFLATION CARRIER FOR
MEDICAMENTS

MS Issue Fee
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TRANSMITTAL LETTER

Dear Commissioner:

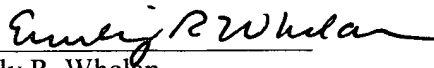
Enclosed are the following items for filing in connection with the above-referenced
Patent Application:

1. Part B Fee(s) Transmittal indicating payment of \$1,700 Issue Fee and
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2. Return Postcard.

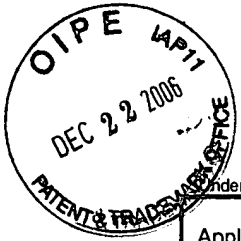
The Director is hereby authorized to charge any deficiency in the fees filed, asserted to
be filed or which should have been filed herewith to our Deposit Account No. 08-0219.

Respectfully submitted,

Dated: December 20, 2006


Emily R. Whelan
Registration No.: 50,391
Attorney for Applicant(s)

Wilmer Cutler Pickering Hale and Dorr LLP
60 State Street
Boston, Massachusetts 02109
(617) 526-6000 (telephone)
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PTO/SB/92 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031

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Application No. (if known): 10/047,060

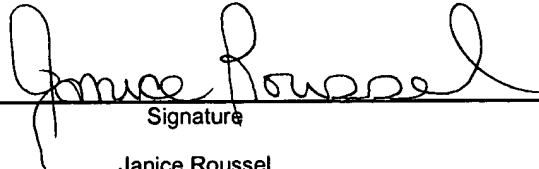
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